(vi) In order to reduce social stigma and discrimination, associated with the HIV/AIDS, sensitization workshops have been conducted for Panchayat Members, Municipal Councillors, Teachers, Medical and other Para-medical personnel etc.

Integrated Primary Health Care System

1938. SHRI JANARDHANA POOJARY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased state:

(a) whether some State Governments have submitted proposals for establishing an Integrated Primary Health Care System in their respective States for improving the quality and effectiveness of the Primary Health Care and Health promotive services through community participation; and

(b) if so, the details in this regard and the cost of the project in respect of each State and the time by when the proposal is likely to materialize?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) and (b) Yes, Sir. From the State Governments of Chhattisgarh and Uttaranchal, proposals have been received for improving the primary health care system, through community empowerment, for a total outlay of Rs. 297.24 crores and Rs. 64.32 crores respectively. These proposals have been forwarded to the Government of Germany for assistance. Likewise, a proposal for decentralized health care, based on the concept of community health, guaranteeing certain minimum health services, has been received from Government of Madhya Pradesh for an outlay of Rs. 170.92 crores which is under examination.

Increase in cancer and AIDS

1939. SHRI JANARDHANA POOJARY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the incidence of cancer and AIDS is on the increase in the country;

(b) if so, the details in this regard and the steps initiated to contain spread of these diseases;

(c) the allocations made during the last five years to various programmes and research agencies engaged in prevention/ minimization of cancer and AIDS;

(d) whether it is also a fact that treatment for these diseases is very costly;

(e) whether Government propose to subsidise medicines/tests for the treatment/diagnosis of these diseases for poor patients; and

(f) if so, the details in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) The data from Population Based Cancer Registries functioning under the National Cancer Registry Programme of ICMR does not indicate any increase in incidence rate of cancer of all sites combined together.

As per information received from National AIDS Control Organization the incidence of AIDS is increasing.

(b) Under the National Cancer Control Programme this Ministry is implementing various schemes aimed at creating awareness among the people and for facilitating treatment and research activities. The details of these schemes may be seen at Statement-I (*See* below).

Statement indicating State-wise number of reported AIDS cases and steps initiated to contain spread of AIDS may be seen at Statement-II (*See* below):

(c) The allocations made for National Cancer Control Programme and National AIDS Control Programme during the last five years are given at Statement-III (*See* below).

(d) to (f) This information is given in Statement-IV.

Statement-I

National Cancer Control Programme

Development of Oncology Wing in Medical College Hospital

This scheme is available only for Government Medical Colleges to fill up the geographical gaps in the detection and treatment of cancer in

the country. Financial assistance up to Rs. 2.00 crore is provided to an institute under the scheme for purchase of equipments like Cobalt Machine, Brachytherapy etc. This is a one-time grant.

Setting up of Cobalt Therapy Unit

Financial assistance up to Rs. 1.50 crore is provided to State Government for setting up of CobaltTherapy Unit in Government institutions.

An amount of Rs. 1.00 crore is provided for Cobalt Therapy Unit to the Non-Governmental Organisations.

The Mammography equipment has also been included under the scheme for setting up of Cobalt Therapy Unit. A Central assistance up to Rs. 30.00 lakhs is provided to those institutions/organisations who have the facilities for treatment of cancer patients and has well-equipped Radiotherapy Department. All these are one-time grant.

District Cancer Control Programme

A scheme of district project (duration-five years) for health education, detection and pain releif measures under National Cancer Control Programme was initiated during the year 1990-91. In this scheme, financial assistance of Rs. 15.00 lakhs is provided to the State Government/UT administration for each district selected under the scheme with a provision of Rs. 10.00 lakhs per annum for each district for the remaining four years of the project period. After five years, the project is to be taken over by the State Government.

Financial Assistance to Registered Voluntary Organisations

Under the scheme assistance upto Rs. 5.00 lakhs is provided to the Voluntary Organisations for undertaking health education and early detection activities in cancer on the specific recommendations of the State Government.

Regional Cancer Centres

This Ministry has recognised 19 Regional Cancer Centres in different States/UTs. The Chittaranjan National Cancer Institute, Kolkata and Institute Rotary Cancer Hospital (IRCH), AIIMS, New Delhi have got a different funding pattern. Remaining RCCs are paid an amount of Rs. 75.00 lakhs annually. These RCCs extend treatment facilities and conduct research in the field of cancer.

Statement-II

State-wise number of reported AIDS cases and steps initiated to contain spread of AIDS

Sl.No.	State	1999	2000	2001
1.	A&N Islands	0	9	8
2.	Andhra Pradesh	2	485	732
3.	Arunachal Pradesh	0	0	0
4.	Assam	11	62	30
5.	Bihar	0	36	53
6.	Chandigarh	124	114	189
7.	Dadra & Nagar Haveli	0	0	0
8.	Daman & Diu	0	0	0
9.	Delhi	0	64	358
10.	Goa	7	10	46
11.	Gujarat	1	245	877
12.	Haryana	0	47	141
13.	Himachal Pradesh	18	15	51
14.	Jammu & Kashmir	0	0	0
15.	Karnataka	47	541	516
16.	Kerala	0	56	105
17.	Lakshadweep	0	0	0
18.	Madhya Pradesh	118	294	139
19.	Maharashtra	64	348	2728
20.	Manipur	61	364	307
21.	Meghalaya	0	0	0
22.	Mizoram	7	3	5
23.	Nagaland	19	52	131
24.	Orissa	0	52	28

Sl.No.	State	1999	2000	2001
25.	Pondicherry	0	0	0
26.	Punjab	52	31	4
27.	Rajasthan	27	106	136
28.	Sikkim	0	0	2
29.	Tamil Nadu	2730	4206	6484
30.	Tripura	0	0	0
31.	Uttar Pradesh	41	93	202
32.	West Bengal	0	0	668
33.	Ahd. Municipal Corp.	0	0	189
	TOTAL:	3325	7232	14129

In order to prevent and control HIV/AIDS, a comprehensive programme is currently under implementation throughout the country as a Centrally sponsored scheme. The main components consist of:—

- Reducing the spread of HIV in groups at high risk by identification of target populations and providing peer counselling, condom promotion, and treatment of sexually transmitted infections.
- Preventive intervention for the general population by Information, Education and Communication (IEC) and awareness campaign, provision of voluntary testing and counselling, safe blood transfusion services and prevention of occupational exposure.
- Providing financial assistance for opportunistic infections, home and community based care.
- Strengthening effectiveness and technical managerial, fianancial sustainability at National, State and Municipal levels.
- Promoting collaboration amongst public, private and voluntary sectors.

Statement-III

Allocation during the 9th Five Year Plan

(a) ***Cancer*** (Rs. in Crore)

Year	Allocation
1997-98	20.00
1998-99	30.00
1999-00	35.00
2000-01	48.00
2001-02	60.00

(b) ***National AIDS Control Programme***

Year	Allocation
1997-98	110.00
1998-99	111.00
1999-00	140.00
2000-01	145.00
2001-02	210.00

Statement-IV

Details of subsidised medicines/tests for the treatment/diagnosis of cancer and AIDS diseases for poor patients

Cancer

Keeping in view the expensive nature of drugs and equipments for cancer treatment it is the endeavour of the Central Government and State Government Hospitals/Institutions to provide cancer treatment either free or at nominal costs to the poor patients. With this objective Central Government initiated National Cancer Control Programme (NCCP) in 1975. The emphasis is to ensure easy accessibility of cancer treatment facilities all over the country.

Besides Government run hospitals and Medical College hospitals, 19 Regional Cancer Centres have been set up under the scheme where

treatment to poor patients is available either free or at nominal cost. Poor patients living below poverty line can also avail of financial assistance from National Illness Assistance Fund (NIAF) being operated by the Ministry of Health and Family Welfare.

AIDS

As far as AIDS is concerned, it is a fact that treatment of this disease is costly. There is no scheme to provide subsidized medicines for the treatment of this disease for the poor patients. However for diagnosis of the disease there is a subsidized fee of Rs. 10/- at the Voluntary Counselling and Testing Centres at the district level.

Adult morbidity rate

1940. SHRI JIBON ROY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government's attention has been drawn to the news-item captioned "Adult morbidity high in slums", which appeared in the Hindustan Times, dated the 17th June, 2002;

(b) if so, the steps Government are taking to reverse the trend;

(c) the parameters maintained in this regard amongst slum dwellers in four metropolis; and

(d) the adult morbidity rates in slum area of other developing countries?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) and (b) Yes, Sir. While the Government of NCT of Delhi is an appropriate authority to take necessary action on the findings of above research study, the following steps have been taken to improve the condition of living of slum dwellers:—

A scheme known as National Slum Development Programme (NSDP) was launched at National level in 1996 to ameliorate the living condition of the urban slum dwellers. Under the scheme, Funds are provided in the form of Additional Central Assistance (ACA) for provision of basic amenities like water supply, storm water drains, community bath, widening and paving of existing lanes, sewers, community latrines etc. Community primary health care central buildings can also be provided under the scheme.